

**Wichita Municipal Court
Court Clerk's Office
455 N Main 2nd Floor
Wichita, Ks 67202-1667
Phone 316-268-4611
Fax 316-268-4249**

CASH BOND REFUND FORM

Customer must provide:

PHOTO I.D. that matches the name on the receipt.
Expired IDs will not be accepted

Court case # _____

Defendants name _____ Date _____

If you are not the defendant,

Would you like to pay the outstanding fines and costs on the **defendant's** case(s) from the cash bond that you have posted?

Yes ☐ No ☐

Customer fill out information below:

Name: _____

Current address: _____ Apt # _____

City, State, Zip: _____

Telephone: Area Code _____

Signature: _____

FOR OFFICE USE ONLY

Bond Posted \$ _____

Amount
Reclassified \$ _____

Amount
Refunded \$ _____

- ☐ EJS shows all charges having a disposition
☐ Record sheet entry
<Cash Bond Refund Request>
☐ Photo ID copied & attached

Specialist Signature

- **Bond refunds cannot be issued at the counter**
- **A check will be mailed within 4-6 weeks of the refund being processed**
- **Outstanding balances owed by the payee will be deducted from the refund**